Case:14-04336-swd Doc #:23 Filed: 08/06/14 Page 1 of 40

B 6 Summary (Official Form 6 - Summary) (12/13)

United States Bankruptcy Court Western District of Michigan

In re	Paul Alan Lucas		Case No.	14-04336
		Debtor	,	
			Chapter	13

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	375,660.00		
B - Personal Property	Yes	4	61,499.27		
C - Property Claimed as Exempt	Yes	2			
D - Creditors Holding Secured Claims	Yes	1		308,816.14	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	3		6,343.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	2		21,864.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			9,899.31
J - Current Expenditures of Individual Debtor(s)	Yes	2			6,351.53
Total Number of Sheets of ALL Schedu	ıles	19			
	To	otal Assets	437,159.27		
			Total Liabilities	337,023.14	

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B 6 Summary (Official Form 6 - Summary) (12/13)

United States Bankruptcy Court Western District of Michigan

In re	Paul Alan Lucas		Case No.	14-04336
		Debtor		
			Chapter	13

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	6,343.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	6,343.00

State the following:

Average Income (from Schedule I, Line 12)	9,899.31
Average Expenses (from Schedule J, Line 22)	6,351.53
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	6,907.32

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	6,343.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		21,864.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		21,864.00

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B6A (Official Form 6A) (12/07)

In re	Paul Alan Lucas		Case No	14-04336	
		D 1.			

Debtor

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Current Value of Husband, Debtor's Interest in Wife, Nature of Debtor's Amount of Description and Location of Property Property, without Interest in Property Joint, or Secured Claim Deducting any Secured Claim or Exemption Community 135,000.00 93.907.00 Single Family Residence Tenancy by the Entirety J 609 Hillock Ct. Grand Haven, MI 49417 Parcel #:70-03-29-208-002 Insurance Through: Citizens Insurance Co. Expiration: 10/19/2013 to 10/19/2014 The Debtor believes the property is worth approximatley \$150,000. In order to calculate the correct liquidation value, the debtor subtracted 10% (\$15,00) from the value for cost of sale leaving a liquidation value of \$135,000. The Debtor's equity in the property is \$20,546 (\$135,0000 minus the secured loan of approximately \$93,907 results in joint equity of approximately \$41,093. The Debtor's 1/2 interest in the equity is therefore \$20,546)

Commercial Property Fee simple 240.660.00 187,541.30 6479 Norton Center Drive

Norton Shores, MI 49441 Parcel #: 61-27-675-000-0007-20 SEV (x2): 133,700 x2 = 267,400

Insurance Through: Selective Insurance Co. of

Southeast

Expiration: 4/1/2014 to 4/1/2015

The Debtor believes the property is worth approximately \$267,400. For purposes of the liquidatin analysis, the Debtor subtracted 10% (\$26,740) for the cost of sale leavings a liquidation value of approximately \$240,660. After subtracting the secured lien of approxmately \$187,541, the Debtor's equity in the property is approximately \$53,119.

> Sub-Total > 375,660.00 (Total of this page)

375,660.00 Total >

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

B6B (Official Form 6B) (12/07)

In re	Paul Alan Lucas			Case No	14-04336	
_			•			
		Debtor	•			

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	Cash in Debtor's Possession: \$400	н	400.00
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or	Husbands Checking Account Huntington 1300 S. Beacon Blvd Grand Haven, MI 49417 Names on Account: Paul and Lauri Lucas	Н	2,038.00
	cooperatives.	Wife's Checking Account** Huntington Bank	J	0.00
		Although it is a joint account, the Debtor is only on it for emerency purposes. All the funds in the account are the non-filing spouse's social security benefits. Therefore, the funds are not property of the estate and have not been included in the Debtor's liquidation value. For purposes of disclosure, the account had approximately \$3100 in it at the time of filing.		
3.	Security deposits with public utilities, telephone companies, landlords, and others.	x		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Household Goods at Debtor(s) Residence: Appliances:\$200.00; Furniture: \$500.00; Electronics: \$500.00; House Tools: \$50.00; Yard Tools: \$100.00	J	675.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	Collectibles in Debtor's Possession: Antiques: \$500.00; Artwork: \$250.00; CD's/DVD's: \$200.00; Books: \$100.00	J	1,050.00
6.	Wearing apparel.	Clothing in Debtor's Possession: Clothing:\$300.00	н	300.00
7.	Furs and jewelry.	Jewelry in Debtor's Possession: Watches: \$150.00; Wedding Rings: \$100.00	Н	250.00
8.	Firearms and sports, photographic, and other hobby equipment.	Hobby Equipment in Debtor's Possession: Bikes: \$100.00; Workout Equipment: \$100.00	J	200.00
			Sub-Tot	al > 4,913.00

³ continuation sheets attached to the Schedule of Personal Property

(Total of this page)

B6B (Official Form 6B) (12/07) - Cont.

In re	Paul Alan Lucas	Case No 14-04336	

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10.	Annuities. Itemize and name each issuer.	X			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	G 10 B N	dividual Retirement Annuity through Fidelity & uaranty Life Insurance Company 001 Fleet Street 6th Floor altimore, MD 21202 ame on Account: Paul Lucas ccount Value: \$12,461.23	н	12,461.23
		In P S N	RA Retirement Plan Through Franklin Templeton evestments O Box 33033 t. Petersburg, FL 33733 ame on Account: Paul Lucas ccount Value: \$13,192.79	н	13,192.79
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.		hem Max Corp (100% stock ownership) iabilities exceed the assets.	Н	1.00
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	С	hem Max Corp	-	3,381.25
		a	he Debtor loaned Chem Max Corp \$3381.25 to pay n employee. The company will pay him back for ne loan.	<i>(</i>	
			(Total	Sub-Total of this page)	al > 29,036.27

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re Paul Alan Lucas Case No. <u>14-04336</u>	In re Paul Alan L	cas	Case No.	14-04336
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Debtor

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	Х			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	N: VI In M	011 XC90 Volvo (31,000 Miles; Good Condition) ame on Title: Paul Lucas N: YV4952CZ2B1605579 surance Through: Citizens Insurance Co. of the idwest xpiration: 4/19/2014 to 10/19/2014	Н	27,550.00
26.	Boats, motors, and accessories.	X			
			(Tota	Sub-Total of this page)	al > 27,550.00

to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re	Paul Alan Lucas	Case No 14-04336	

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
27. Aircraft and accessories.	х		
28. Office equipment, furnishings, and supplies.	The Debtor does not have any individual business supplies. Any supplies or funishings for Chem Ma Corp is included in the value listed on Schedule B 13.	- x #	0.00
29. Machinery, fixtures, equipment, and supplies used in business.	The Debtor does not have any individual business equipment. Any business equipment for Chem Ma Corp is included in the value listed on Schedule B 13.		0.00
30. Inventory.	The Debtor does not have any individual business inventory. Any inventory for Chem Max Corp is included in the value listed on Schedule B # 13.	-	0.00
31. Animals.	x		
32. Crops - growing or harvested. Give particulars.	x		
33. Farming equipment and implements.	X		
34. Farm supplies, chemicals, and feed.	x		
35. Other personal property of any kind not already listed. Itemize.	x		

Sub-Total > 0.00 (Total of this page)

Total >

61,499.27

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

B6C (Official Form 6C) (4/13)

In re	Paul Alan Lucas		Case No.	14-04336	
		,			

Debtor

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled u (Check one box) ■ 11 U.S.C. §522(b)(2) □ 11 U.S.C. §522(b)(3)	ınder:	r: Check if debtor claims a homestead exemption that ex \$155,675. (Amount subject to adjustment on 4/1/16, and every three with respect to cases commenced on or after the date of				
Description of Property	Specify Law Prov Each Exemption	iding Value of Claimed exemption	Current Value of Property Without Deducting Exemption			
Real Property Single Family Residence 609 Hillock Ct. Grand Haven, MI 49417 Parcel #:70-03-29-208-002 Insurance Through: Citizens Insurance Co. Expiration: 10/19/2013 to 10/19/2014	11 U.S.C. § 522(d)(1)	20,546.00	135,000.00			
The Debtor believes the property is worth approximatley \$150,000. In order to calculate the correct liquidation value, the debtor subtracted 10% (\$15,00) from the value for cost of sale leaving a liquidation value of \$135,000. The Debtor's equity in the property is \$20,546 (\$135,0000 minus the secured loan of approximately \$93,907 results in joint equity of approximately \$41,093. The Debtor's 1/2 interest in the equity is therefore \$20,546)						
<u>Cash on Hand</u> Cash in Debtor's Possession: \$400	11 U.S.C. § 522(d)(5)	400.00	400.00			
Checking, Savings, or Other Financial Accounts, C Husbands Checking Account Huntington 1300 S. Beacon Blvd Grand Haven, MI 49417 Names on Account: Paul and Lauri Lucas	certificates of Deposit 11 U.S.C. § 522(d)(5)	2,038.00	2,038.00			
Household Goods and Furnishings Household Goods at Debtor(s) Residence: Appliances:\$200.00; Furniture: \$500.00; Electronics: \$500.00; House Tools: \$50.00; Yard Tools: \$100.00	11 U.S.C. § 522(d)(3)	675.00	1,350.00			
Books, Pictures and Other Art Objects; Collectibles Collectibles in Debtor's Possession: Antiques: \$500.00; Artwork: \$250.00; CD's/DVD's: \$200.00; Books: \$100.00	<u>s</u> 11 U.S.C. § 522(d)(3)	525.00	1,050.00			
Wearing Apparel Clothing in Debtor's Possession: Clothing:\$300.00	11 U.S.C. § 522(d)(3)	300.00	300.00			
<u>Furs and Jewelry</u> Jewelry in Debtor's Possession: Watches: \$150.00; Wedding Rings: \$100.00	11 U.S.C. § 522(d)(4)	250.00	250.00			
Firearms and Sports, Photographic and Other Hob Hobby Equipment in Debtor's Possession: Bikes: \$100.00; Workout Equipment: \$100.00	by Equipment 11 U.S.C. § 522(d)(3)	200.00	200.00			

¹ continuation sheets attached to Schedule of Property Claimed as Exempt

B6C (Official Form 6C) (4/13) -- Cont.

In re	Paul Alan Lucas	Case No14-04336

Debtor

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT (Continuation Sheet)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Interests in IRA, ERISA, Keogh, or Other Pension Individual Retirement Annuity through Fidelity & Guaranty Life Insurance Company 1001 Fleet Street 6th Floor Baltimore, MD 21202 Name on Account: Paul Lucas Account Value: \$12,461.23		12,461.23	12,461.23
IRA Retirement Plan Through Franklin Templeton Investments PO Box 33033 St. Petersburg, FL 33733 Name on Account: Paul Lucas Account Value: \$13,192.79	11 U.S.C. § 522(d)(12)	13,192.79	13,192.79
Stock and Interests in Businesses Chem Max Corp (100% stock ownership) Liabilities exceed the assets.	11 U.S.C. § 522(d)(5)	1.00	1.00
Accounts Receivable Chem Max Corp	11 U.S.C. § 522(d)(5)	1,215.00	3,381.25

The Debtor loaned Chem Max Corp \$3381.25 to pay an employee. The company will pay him back for the loan.

Total: 51,804.02 169,624.27 Case:14-04336-swd Doc #:23 Filed: 08/06/14 Page 10 of 40

B6D (Official Form 6D) (12/07)

In re	Paul Alan Lucas	Case No). <u>14-04336</u>	

Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R) N H	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	コーGDーロ	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxxxxxxxx1304 Chase Auto Attn:National Bankruptcy Dept Po Box 29505 Phoenix, AZ 85038		-	7/01/11 Auto Lien 2011 XC90 Volvo (31,000 Miles; Good Condition) Name on Title: Paul Lucas VIN: YV4952CZ2B1605579 Insurance Through: Citizens Insurance Co. of the Midwest Value \$ 27,550.00	T	A T E D		27,367.84	0.00
Account No. 5759 Citimortgage Inc Po Box 9438 Gaithersburg, MD 20898	x	J	4/01/06 Mortgage Single Family Residence 609 Hillock Ct. Grand Haven, MI 49417 Parcel #:70-03-29-208-002 Insurance Through: Citizens Insurance Co.				27,007.04	0.00
Account No. 5520 Talmer West Bank PO Box 13037 Lansing, MI 48901	x	J	Value \$ 135,000.00 8/2006 Mortgage (Commercial) Commercial Property 6479 Norton Center Drive Norton Shores, MI 49441 Parcel #: 61-27-675-000-0007-20 SEV (x2): 133,700 x2 = 267,400 Insurance Through: Selective Insurance				93,907.00	0.00
Account No.			Value \$ 240,660.00				187,541.30	0.00
			Value \$					
continuation sheets attached			(Total of	Subt			308,816.14	0.00
			(Report on Summary of S		ota lule		308,816.14	0.00

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B6E (Official Form 6E) (4/13)

In re	Paul Alan Lucas		Case No. <u>14-04336</u>
_			;
		Debtor	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled

"Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules. Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relationship of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sale representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
■ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Feder Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

continuation sheets attached

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (4/13) - Cont.

In re	Paul Alan Lucas			Case No	14-04336	
_		Debtor	_,			

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community UZLLQULDATED AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ONTINGENT S P U T E D AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C AND ACCOUNT NUMBER (See instructions.) 2013 Account No. 5909 **Income Taxes** Internal Revenue Service 0.00 PO Box 7346 Philadelphia, PA 19101-7346 3,383.00 3,383.00 Account No. n/a United States Attorney's Off. **PO Box 208 Internal Revenue Service Notice Only** Grand Rapids, MI 49501 Account No. 5909 2012 Income Tax **Internal Revenue Service** 0.00 PO Box 7346 Philadelphia, PA 19101-7346 2,004.00 2,004.00 Account No. 5909 2013 Michigan Income Taxes Michigan Department of Treasur 0.00 PO Box 30199 Lansing, MI 48909 659.00 659.00 Account No. n/a Michigan Attorney General P.O. Box 30212 Michigan Department of Treasur **Notice Only** Lansing, MI 48909 Subtotal 0.00 Sheet 1 of 2 continuation sheets attached to (Total of this page) 6,046.00 6,046.00 Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re	Paul Alan Lucas		Case No.	14-04336
_		Debtor		

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY UNLIQUIDATED CODEBTOR Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ONTINGENT SPUTED AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C J AND ACCOUNT NUMBER (See instructions.) Account No. 5909 2012 Michigan Income Tax **US Department of Treasury** 0.00 1500 Pennsylvania Ave. NW Washington, DC 20220 297.00 297.00 Account No. Account No. Account No. Account No. Subtotal 0.00 Sheet **2** of **2** continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 297.00 297.00 Total 0.00 (Report on Summary of Schedules) 6,343.00 6,343.00 Case:14-04336-swd Doc #:23 Filed: 08/06/14 Page 14 of 40

B6F (Official Form 6F) (12/07)

In re	Paul Alan Lucas		Case No.	14-04336
		Debtor		

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

8								
CREDITOR'S NAME,	CO	Hu	sband, Wife, Joint, or Community	CONT	DNL	D	Τ	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	I DATE CLAIM WAS INCURRED AND	N G	QD_	U T F	!	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxx6302			5/01/07	T	.DATED		Ī	
Capital 1 Bank Attn: Bankruptcy Dept. Po Box 30285 Salt Lake City, UT 84130		-	Credit Card		D			9,610.00
Account No. xxxxxxxxxxxx3349	┢	Г	10/01/06	Ħ	H	T	T	
Capital 1 Bank Attn: Bankruptcy Dept. Po Box 30285 Salt Lake City, UT 84130		-	Credit Card					5,243.00
Account No. xxxxxxxxxxxx9060	┢		2/01/02	\forall	Н	H	t	
Capital 1 Bank Attn: Bankruptcy Dept. Po Box 30285 Salt Lake City, UT 84130		-	Credit Card					3,242.00
Account No. unknown			unknown				Ť	
Citi Mortgage P.O. Box 183040 Columbus, OH 43218-3040		-	Possible Deficency from Foreclosed Property. Debtor does not believe a deficency is owed but listed the debt for notice purposes.			x	(
						L	\perp	1.00
continuation sheets attached			S (Total of the	Subt his p				18,096.00

B6F (Official Form 6F) (12/07) - Cont.

In re	Paul Alan Lucas		Case No	14-04336	
_		Debtor			

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

	1.	1		T_	1	-	T
CREDITOR'S NAME, MAILING ADDRESS	CODEBTOR	Hu	sband, Wife, Joint, or Community	- N	N L	DISPUTED	
INCLUDING ZIP CODE,	E B	W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	T	Q	P U	AMOUNTEOFOLADA
AND ACCOUNT NUMBER (See instructions above.)	O R	C	IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	UNLIQUIDATED	Ė	AMOUNT OF CLAIM
Account No. xxxxxxxx9000	╁	H	9/01/12	T N	A T E		
	1		Lease		Þ		
First Data 1307 Walt Whitman Rd		L					
Melville, NY 11747							
							1,484.00
Account No. unknown			unknown				
Huntington Bank			Possible Deficency from Foreclosed Property. Debtor does not believe a deficency is owed				
1300 S. Beacon Blvd		-	but listed the debt for notice purposes.			x	
Grand Haven, MI 49417							
							1.00
-	L	_		igspace	-		1.00
Account No. 123A	ł		unknown Line of Credit				
Lease Finance Group LLC							
65 East Wacker Place		-					
Suite 510							
Chicago, IL 60601							2,283.00
Account No.	╀			╀		H	_,
Account No.	ł						
Account No.	t			+	H	H	
	1						
Sheet no1 _ of _1 _ sheets attached to Schedule of				Subt	tota	ıl	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				3,768.00
				7	Γota	ıl	
			(Report on Summary of So	hec	lule	es)	21,864.00

Case:14-04336-swd Doc #:23 Filed: 08/06/14 Page 16 of 40

B6G (Official Form 6G) (12/07)

In re	Paul Alan Lucas		Case No	14-04336	
_		Debtor			

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case:14-04336-swd Doc #:23 Filed: 08/06/14 Page 17 of 40

B6H (Official Form 6H) (12/07)

_	B 141 1		C N	4.4.0.4000	
In re	Paul Alan Lucas		Case No	14-04336	
		,	,		
		Debtor			

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

Grand Haven, MI 49417

NAME AND ADDRESS OF CODEBTOR

Lauraine Lucas
609 Hillock Court
Grand Haven, MI 49417

Citimortgage Inc
Po Box 9438
Gaithersburg, MD 20898

Lauraine Lucas
Falmer West Bank
609 Hillock Court
PO Box 13037

Lansing, MI 48901

Fill	in this information t	to identify your c	35e.									
	otor 1	Paul Alan Lu										
	otor 2 ouse, if filing)						_					
Uni	ted States Bankrup	otcy Court for the	: WESTERN DISTRIC	Γ OF MIC	HIGAN		_					
	se number 14-	-04336		•				ΠА	k if this is n amende	ed filing		
											ng post-petition following date:	
	fficial Form		ome.					ĪV	IM / DD/ Y	YYY		12/13
sup spo atta	plying correct infouse. If you are sep ch a separate she	ormation. If you parated and you	sible. If two married pec are married and not fili r spouse is not filing w On the top of any additi	ng jointly ith you, c	/, and your s lo not includ	oouse e infor	is liv matic	ing with on abou	you, inc t your sp	lude infoi ouse. If m	rmation abou nore space is	t your needed,
1.	Fill in your empl information.	oyment		Debtor	1				Debtor 2	2 or non-f	iling spouse	
	If you have more attach a separate information about	page with	Employment status	■ Employed□ Not employed					☐ Employed ■ Not employed			
	employers.		Occupation	Small Business Operator								
	Include part-time, self-employed wo		Employer's name	Chex	Max Corp.							
	Occupation may i or homemaker, if		Employer's address		Norton Cen egon, MI 49		ve					
Par	rt 2: Give De	tails About Mor	How long employed t	here?	29				_			
Esti spou	mate monthly incouse unless you are	ome as of the da separated. spouse have mo	ate you file this form. If	•			•	·		·	·	J
								For Del	otor 1		ebtor 2 or ing spouse	
2.			ry, and commissions (becalculate what the month			2.	\$	3	740.00	\$	0.00	
3.	Estimate and lis	t monthly overt	ime pay.			3.	+\$		0.00	+\$	0.00	•
4.	Calculate gross	Income. Add lir	ne 2 + line 3.			4.	\$	3,74	10.00	\$	0.00	

Copy line 4 here 4. 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. 5b. Mandatory contributions for retirement plans 5b. 5c. Voluntary contributions for retirement plans 5c. 5d. Required repayments of retirement fund loans 5d. 5e. Insurance 5e. 5f. Domestic support obligations 5f. 5g. Union dues 5g. 5h. Other deductions. Specify: 5h.+ 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. 8b. Interest and dividends 8b. 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 8d. Unemployment compensation 8d.	\$ 3,740.00 \$ 1,200.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 1,200.00	For Debtor 2 or non-filing spouse \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00						
5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. 5d. Required repayments of retirement fund loans 5d. 5e. Insurance 5e. Insurance 5f. Domestic support obligations 5g. Union dues 5g. 5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive lnclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 8d. Unemployment compensation	\$ 1,200.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00						
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5d. Required repayments of retirement fund loans 5e. Insurance 5f. Domestic support obligations 5g. Union dues 5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 8d. Unemployment compensation	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00						
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8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 8d. Unemployment compensation		\$ 0.00						
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 8d. Unemployment compensation	\$ 2,540.00	\$ 0.00						
8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. Unemployment compensation 8d.	\$ 5,803.31	\$ 0.00						
regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 8d. Unemployment compensation 8d.	\$ 0.00	\$ 0.00						
	\$ 0.00	\$ 0.00						
	\$ 0.00	\$ 0.00						
8e. Social Security 8e.	\$ 0.00	\$ 1,556.00						
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f.	\$0.00	\$0.00_						
8g. Pension or retirement income 8g.	\$0.00	\$						
8h. Other monthly income. Specify: 8h.+	\$	+ \$ 0.00						
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9.	\$5,803.31	\$1,556.00						
10. Calculate monthly income. Add line 7 + line 9.	8,343.31 + \$	1,556.00 = \$ 9,899.31						
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00								
 Add the amount in the last column of line 10 to the amount in line 11. The result is th Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabia applies 		12. \$ 9,899.31 Combined						
13. Do you expect an increase or decrease within the year after you file this form?☐ No.		monthly income						
Yes. Explain: The Debtor's income tax witholdings are estiamted.								

Dobtor 1 Paul Alan Lucas Debtor 2 Scouse, filling A suspenses include Paul Alan Lucas Paul Alan Lucas A suspenses include Paul Alan Lucas Paul Alan Lucas A suspenses A suspenses A suspense A suspense	Filli	in this informa	tion to identify yo	our case:							
A supplement showing post-petition chapter	Debt	tor 1	Paul Alan Lu	cae			Ch	eck if this is	ę·		
A supplement showing post-petition chapter (13 exponences as of the following date:	505	.01	Faui Alaii Lu	cas							
Spouse, if filing	Debt	tor 2							Ū	ving post-petition cha	pter
A separate filing for Debtor 2 because Debtor (#thrown)	(Spo	ouse, if filing)									
Official Form B 6J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part I: Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Debtor 2 live in a separate household? No. On the list Debtor 1 was a separate household? No. Do not list Debtor 1 was file a separate Schedule J. 2. Do you have dependents? No. Do not list Debtor 1 was file a separate Schedule J. 2. Do not state the dependents names. Part I: Settina 10 bettor 1 was file a separate Schedule J. 2. Do your expenses include according to the search dispendent. No. Was been dependent and bettor 2. No. On the state the dependents names. No. Was been dependent and bettor 2. No. Was been dependent and bettor 3. No. Was been dependent and better the search dependent with your page and better 1 or Debtor 2. No. Was been dependent and better 1 or Debtor 2. No. Was been dependent and better 1 or Debtor 2. No. Was been dependent and better 1 or Debtor 2. No. Was been dependent and better 1 or Debtor 2. No. Was been dependent and better 1 or Debtor 2. No. Was been dependent and better 1 or Debtor 2. No. Was been dependent and better 1 or Debtor 2. No. Was been dependent and better 1 or Debtor 2. No. Was been dependent and better 1 or Debtor 2. No. Was been dependent and been dependent with your page and better 1 or Debtor 2. No. Was been dependent and been depende	Unite	ed States Bankru	uptcy Court for the:	WESTE	RN DISTRICT OF MICHIG	GAN		MM / DD	/ YYYY		
Official Form B 6J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known), Answer every question. Part ! Describe Your Household 1. Is this a joint case? No. Got to line 2. Yes. Does Debtor 2 inversifie a separate household? No. Got to line 2. Yes. Debtor 1 must file a separate Schedule J. 2. Do you have dependents? No In or list Debtor 1 yes. Fill out this information for an and Debtor 2. Do not state the dependents names. Does dependent live with your? No Yes. Solution of the dependent names. Does dependent live with your? No Yes. No No Yes. Solution of the dependent names. Does dependent live with your? Yes. Part 2. Estimate Your expenses include expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a dot after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 6.) 4. The rental or home ownership expenses for your residence. Include first mortgage papers and any cent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium does 4d. Homeowner's association or condominium does 4d. Homeowner's association or condominium does 12/13/16	Case	e number 14	-04336			ĺ					ebtor
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. The complete of the	(If kr	nown)						2 mainta	ins a sepa	rate household	
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 12	Of	ficial Fo	rm B 6J								
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 12	Sc	chedule	J: Your I	_ Expen	ses						12/13
No. Go to line 2. Yes. Dospos Debtor 2 live in a separate household? No. Go to line 2. No. Yes. Debtor 2 must file a separate Schedule J. Do not list Debtor 1	Be a	as complete a ormation. If m	and accurate as ore space is ne	possible. eded, atta	If two married people ar ch another sheet to this						
No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No				hold							
	1.	_									
No											
Yes. Debtor 2 must file a separate Schedule J. 2. Do you have dependents? No Do not list Debtor 1		☐ Yes. Doe	s Debtor 2 live i	n a separa	ate household?						
Do not list Debtor 1 and Debtor 2. Do not state the dependents' names. Do not state the dependents' names. Do not state the dependents' names. Do your expenses include expenses of people other than yourself and your dependents? Do your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 6I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 125.00 4d. Home maintenance, repair, and upkeep expenses 4d. \$ 125.00 4d. Homeowner's association or condominium dues		= :::	_	st file a sep	arate Schedule J.						
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Yes No No Yes Yes No Yes Yes Yes No Yes		dependents'	names.							☐ Yes	
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2:										□ No	
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2:										☐ Yes	
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 6I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4b. \$ 0.00 4c. Home maintenance, repair, and upkeep expenses 4c. \$ 0.00 125.00 4d. Homeowner's association or condominium dues										□ No	
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4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00 125.00							_	•			
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4d. Homeowner's association or condominium dues 4d. \$ 0.00			•					·			
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	5.					me equity loans				0.00	

Paul Alan Lucas	Case num	ber (if known)	14-04336
Utilities:			
6a. Electricity, heat, natural gas	6a.	\$	200.00
6b. Water, sewer, garbage collection	6b.	\$	40.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	240.00
6d. Other. Specify:	6d.	\$	0.00
Food and housekeeping supplies	7.	\$	800.00
Childcare and children's education costs	8.	\$	0.00
Clothing, laundry, and dry cleaning	9.	\$	250.00
Personal care products and services	10.	\$	100.00
Medical and dental expenses	11.	\$	500.00
			C00 00
		·	600.00
		·	150.00
-	14.	\$	50.00
	150	¢	15.00
		· -	0.00
		·	
		·	164.00
	13u.	Ψ	0.00
	16	\$	0.00
		Ψ	0.00
	17a.	\$	0.00
, ,		·	0.00
17c Other Specify:		·	0.00
		•	0.00
· · ·		<u> </u>	0.00
	18.	\$	0.00
		\$	0.00
Specify:	19.		
Other real property expenses not included in lines 4 or 5 of this form or on Sci	hedule I: Y	our Income.	
20a. Mortgages on other property			0.00
20b. Real estate taxes	20b.	\$	0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$	100.00
20e. Homeowner's association or condominium dues	20e.	\$	0.00
Other: Specify: Postage/Banking/Misc	21.	+\$	100.00
		+\$	1,556.00
			·
· · · · · · · · · · · · · · · · · · ·	22.	5	6,351.53
	220	¢	9,899.31
Zob. Copy your monthly expenses normalitie 22 above.	230.	-φ	6,351.53
23c. Subtract your monthly expenses from your monthly income.			
	Utilities: 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: Your payments of alimony, maintenance, and support that you did not report a deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). Other payments you make to support others who do not live with you. Specify:	Utilities: 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. 6d. Other. Specify: 6d. Other. Specify: 6d. Other insurance 6d. Other insurance. Specify: 6d. Other. Specify: 6d. Other. Specify: 6d. Other. Specify: 6d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 61). 6d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on to live with you. 6d. Other real property expenses. Other insurance 6d. Other insurance on the from your pay or included in lines 4 or 20. 6d. Other payments for Vehicle 1 6d. Other specify: 6d. Oth	Utilities: 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. Other. Specify: 6d. \$ Food and housekeeping supplies Childcare and children's education costs 8. \$ Cholidcare and children's education costs Clothing, laundry, and dry cleaning 9. \$ Personal care products and services 10. \$ Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations 14. \$ Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance, specify: 15a. \$ 15d. \$ 15d. \$ 15d. \$ 17a. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify

Yes. Explain:

11. The Debtor's non-filing spouse has a lot of medical expenses stemming from a transplant.

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 $B6\ Declaration\ (Official\ Form\ 6$ - Declaration). (12/07)

United States Bankruptcy Court Western District of Michigan

In re	Paul Alan Lucas			Case No.	14-04336						
			Debtor(s)	Chapter	13						
	DECLARATION CONCE	RN	ING DEBTOR'S SO	HEDULI	ES						
DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR											
	I declare under penalty of perjury that I have				es, consisting of21						
	sheets, and that they are true and correct to the best o	or m	y knowledge, information,	and belief.							
Date	August 6, 2014 Signatu	ıre	/s/ Paul Alan Lucas								
			Paul Alan Lucas								

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Debtor

Case:14-04336-swd Doc #:23 Filed: 08/06/14 Page 23 of 40

B7 (Official Form 7) (04/13)

United States Bankruptcy Court Western District of Michigan

In re	Paul Alan Lucas		Case No.	14-04336
		Debtor(s)	Chapter	13

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None	

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$60,875.00	January 1, 2014 to Present: Operating Chem Max Corp. (Debtor): Total Income: \$201,402.13 - Total Deductions = A Negative Taxable Income; Employee at Chem Max Corp.(Debtor): \$23,375.00; Income from rental property (Debtor): \$37,500
\$66,001.00	January 1, 2013 to December 31, 2013: Operating Chem Max Corp. (Debtor): Total Income: \$251,502 - Total Deductions: \$296,070 = Taxable Income: \$-44,568; Employee at Chem Max Corp.(Debtor): \$48,620; Income from rental property (Debtor): \$17,381
\$63,763.00	January 1, 2012 to December 31, 2012:Operating Chem Max Corp. (Debtor): \$0; Employee at Chem Max Corp.(Debtor): \$48,620; Income from rental property (Debtor): \$15,143

B7 (Official Form 7) (04/13)

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2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT \$9,336.00	SOURCE January 1, 2014 to Present: Social Security Benefits (Debtor's Spouse) \$9,336.00
\$16,697.00	January 1, 2013 to December 31, 2013: Social Security Benefits (Debtor's Spouse) \$16,697
\$16,421.00	January 1, 2012 to December 31, 2012: Social Security Benefits (Debtor's Spouse) \$16,421

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR Capital One PO Box 30285 Salt Lake City, UT 84130	DATES OF PAYMENTS 4/4/2014,4/11/2014,4/18/201 4,4/25/2014,5/2/2014/,5/9/20 14/,5/16/2014,/5/16/2014,5/2 3/2014,5/30/2014,6/6/2014,6/ 13/2014,6/20/2014	AMOUNT PAID \$3,250.00	AMOUNT STILL OWING \$9,610.00
Capital One PO Box 30285 Salt Lake City, UT 84130	4/4/2014,4/11/2014,4/18/201 4,4/25/2014,5/2/2014/,5/9/20 14/,5/16/2014,/5/16/2014,5/2 3/2014,5/30/2014,6/6/2014,6/ 13/2014,6/20/2014	\$6,500.00	\$3,242.00
Capital One PO Box 30285 Salt Lake City, UT 84130	4/4/2014,4/11/2014,4/18/201 4,4/25/2014,5/2/2014/,5/9/20 14/,5/16/2014,/5/16/2014,5/2 3/2014,5/30/2014,6/6/2014,6/ 13/2014,6/20/2014	\$5,850.00	\$5,243.00
Citimortgage (Residence) PO Box 9438 Gaithersburg, MD 20898	6/20/2014,6/6/2014,5/23/201 4,5/9/2014,4/25/2014,4/11/20 14	\$3,770.40	\$93,907.00
Talmer West Bank (Commercial Building) PO Box 13037 Lansing, MI 48901	4/2014,5/2014,6/2014	\$8,567.00	\$187,542.00
Chase Auto (Auto Loan) P.O. Box 29214 Phoenix, AZ 85038	4/2014,5/2014,6/2014	\$2,412.00	\$28,071.00

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B7 (Official Form 7) (04/13)

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None b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days

immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not

> DATES OF PAYMENTS/ **TRANSFERS**

AMOUNT PAID OR AMOUNT STILL VALUE OF OWING TRANSFERS

NAME AND ADDRESS OF CREDITOR

None c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF

COURT OR AGENCY

STATUS OR

PROCEEDING

AND LOCATION

DISPOSITION

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF **PROPERTY**

5. Repossessions, foreclosures and returns

None П

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER **Huntington Bank** Commercial Loan Servicing 2361 Morse Rd Columbus, OH 43229

Columbus, OH 43218-3040

CitiMortgage 2012 P.O. Box 183040

FORECLOSURE SALE, TRANSFER OR RETURN

DATE OF REPOSSESSION.

4/2013

DESCRIPTION AND VALUE OF **PROPERTY**

Mortgage on Property Located at: 14758 152 Ave.

Grand Haven, MI 49417

\$58.204.80

Mortgage on Property Located at:

613 E. Pontaluna Muskegon, MI 49441

\$80,000

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION Jehovah's Witness 16251 Robbins Rd. Grand Haven, MI 49417 Jehovah's Witness RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT **5/13/2014**

DESCRIPTION AND VALUE OF GIFT

Charitable Donation in the

Amount of \$700.00

2014

Monthly Charitable Donations in the Amount of \$50.00

Grand Haven, MI 49417

16251 Robbins Rd

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Abacus Credit Counseling 17337 Ventura Blvd Suite 226 Encino, CA 91316

Chase & Bylenga, PLLC 77 Monroe Center NW Suite 507 Grand Rapids, MI 49503 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR 6/16/14 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

\$25

Credit Counseling Certificate

\$1,000.00 for Atty. Fees

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10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION IRA

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

Debtor rolled over his IRA from Tallmer to his current IRA in the Spring of 2014.

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

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15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

NAME (ITIN)/ COMPLETE EIN

Chem Max Corp. 38-2566960

ADDRESS NATURE OF BUSINESS

Manufacturing

6479 Norton Center Dr. Norton Shores, MI 49441 BEGINNING AND

ENDING DATES

29 years

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS Walburg & Associates 201 Washington Ave. Grand Haven, MI 49417

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

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NAME AND ADDRESS DATE ISSUED

20. Inventories

None П

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory,

and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

12/2013 **Paul Lucas**

None

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

12/2013

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY

RECORDS **Paul Alan Lucas**

609 Hillock Ct Grand Haven, MI 49417

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the commencement of this case.

NAME

None

ADDRESS

DATE OF WITHDRAWAL

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year

immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT. RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

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24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date August 6, 2014 Signature /s/ Paul Alan Lucas
Paul Alan Lucas
Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B 22C (Official Form 22C) (Chapter 13) (04/13)

In re	Paul Ala	ın Lucas	According to the calculations required by this statement:
		Debtor(s)	\square The applicable commitment period is 3 years.
Case Nu	mber:	14-04336	■ The applicable commitment period is 5 years.
		(If known)	■ Disposable income is determined under § 1325(b)(3).
			\square Disposable income is not determined under § 1325(b)(3).
			(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

	Par	t I.	REPORT OF INC	COM	IE .					
	Marital/filing status. Check the box that applies an	state	ment	as directed.						
1	b. Married. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income All figures must reflect average monthly income received from all sources, derived during the six									
								for Lines 2-10.		
								Column A		Column B
	calendar months prior to filing the bankruptcy case,							Debtor's		Spouse's
	the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.							Income		Income
2	Gross wages, salary, tips, bonuses, overtime, com	mis	ssions.				\$	3,740.00	\$	0.00
3	Income from the operation of a business, profession enter the difference in the appropriate column(s) of profession or farm, enter aggregate numbers and pronumber less than zero. Do not include any part of a deduction in Part IV.	Lin ovic	e 3. If you operate le details on an atta	more chm	e than one busi ent. Do not ent	ness, er a				
			Debtor		Spouse					
	a. Gross receipts	\$	31,325.86			0.00				
	b. Ordinary and necessary business expenses c. Business income	\$	30,938.55 btract Line b from 1			0.00	\$	387.32	Ф	0.00
4	the appropriate column(s) of Line 4. Do not enter a part of the operating expenses entered on Line b		a deduction in Par		•	ny				
4		\$	Debtor 5,625.00	Ф	Spouse	0.00				
	a. Gross receipts b. Ordinary and necessary operating expenses	\$	2,845.00			0.00				
	c. Rent and other real property income		btract Line b from			,,,,,,	\$	2,780.00	\$	0.00
5	Interest, dividends, and royalties.						\$	0.00	\$	0.00
6	Pension and retirement income.					\$	0.00	\$	0.00	
7	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B.						\$	0.00	\$	0.00
8	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:									
	Unemployment compensation claimed to be a benefit under the Social Security Act Debtor	\$	0.00 Spe	ouse	\$ 0	0.00	\$	0.00	\$	0.00

9	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include alimony or separate maintenance payments paid by your spouse, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.						
	Debtor Spouse						
	a.	0.0	0 \$	0.00			
10	Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s).			0.00			
11	Total. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.			6,907.32			
	Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PE	ERIOD					
12	Enter the amount from Line 11		\$	6,907.32			
13	Marital Adjustment. If you are married, but are not filing jointly with your spouse, AND if you cont calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of enter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a regul the household expenses of you or your dependents and specify, in the lines below, the basis for exclusion income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional on a separate page. If the conditions for entering this adjustment do not apply, enter zero. a.	your spouse, lar basis for ding this debtor or the					
	Total and enter on Line 13		\$	0.00			
14	Subtract Line 13 from Line 12 and enter the result.		\$	6,907.32			
15	Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the nu enter the result.	umber 12 and	\$	82,887.84			
16	Applicable median family income. Enter the median family income for applicable state and househo information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy course. Enter debtor's state of residence: MI b. Enter debtor's household size:		Ф	50.040.00			
			\$	53,310.00			
17	 Application of § 1325(b)(4). Check the applicable box and proceed as directed. □ The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable top of page 1 of this statement and continue with this statement. ■ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicate at the top of page 1 of this statement and continue with this statement. 						
	Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABLE	E INCOME					
18	Enter the amount from Line 11.		\$	6,907.32			
19	Marital Adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expedebtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B incompayment of the spouse's tax liability or the spouse's support of persons other than the debtor or the dedependents) and the amount of income devoted to each purpose. If necessary, list additional adjustmes separate page. If the conditions for entering this adjustment do not apply, enter zero. a.						
	Total and enter on Line 19.		\$	0.00			
20	Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.		\$	6,907.32			

Application of § 1325(b)(3). Check the applicable box and proceed as directed. The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is determined under § 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement. The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is not determined under 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete Parts IV, V, or VI. Part IV. CALCULATION OF DEDUCTIONS FROM INCOME Subpart A: Deductions under Standards of the Internal Revenue Service (IRS) National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous. Enter in Line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable number of persons. (This information is available at www.wasi.gov.in/2 of from the clerk of the bankruptey court.) The applicable number of persons is the number dam and additional dependents whom you support. National Standards: health care. Enter in Line al below the amount from IRS National Standards for Out-ob-Pocket Health Care for persons So years of age, and in Line 22 the IRS National Standards for Out-ob-Pocket Health Care for persons So years of age of odder. (This information is available a www.wasid.jov.inst' or from the clerk of the bankruptey court.) Enter in Line b the applicable number of persons who are under 65 years of age, and enter in line b 2 the applicable number of persons who are under 50 years of age, and enter in line b 2 the applicable number of persons who are under 50 years of age, and the persons who are under 50 years of age, and the persons of a person year odder. (This information is available to www.usdoj.gov/ust' or from the clerk of the bankruptey court.) Enter the unmount of the IRS Housing and Utilities Standards; housing and utilities; non-mortgage expenses. Enter the unmount of the	21		dized current monthly income result.	come for § 1325(b)(3). N	Multip	ply the am	ount from Line 2	0 by the number 12 and	\$	82,887.84
The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is determined under \$ 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement. In the amount on Line 22 the mount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is not determined under 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete Parts IV, v, or VI. Part IV. CALCULATION OF DEDUCTIONS FROM INCOME	22	Applic	able median family incon	ne. Enter the amount from	m Lin	ne 16.			\$	53,310.00
1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement.		Applic	eation of § 1325(b)(3). Che	eck the applicable box ar	nd pro	oceed as d	irected.		ı	
Part IV. CALCULATION OF DEDUCTIONS FROM INCOME Subpart A: Deductions under Standards of the Internal Revenue Service (IRS) National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous. Internal Inc. 234. the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable number of persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptey court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. National Standards: health care. Enter in Line a! below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line 24 the IRS National Standards for Out-of-Pocket Health Care for persons in each age category is the number of persons who are of years of age of older. (This information is available at www.usdoj.gov/ust/ Die al Dy Line 10 by Line	23								nined u	ınder §
National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous. Enter in Line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable number of persons. (This information is available at www.usdoj.gov/ust or from the clerk of the bankruptcy court.) The applicable number of persons is the number of any additional dependents whom you support. National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons so set of years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons of Seyaers of age or older. (The applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are so years of age or older enter in Line b2 the applicable number of persons who are 50 years of age or older. (The applicable number of persons in cach age category is the number of that category that would currently be allowed as exemptions on your feedral income tax return, plus the number of persons who are 50 years of age or older. (The applicable number of persons in cach age category is the number of persons under 65, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B. Persons under 65 years of age Persons 65 and older, and enter the result in Line 24B. Persons under 65 years of age Persons 65 and older, and enter the result in Line 24B. Persons under 65 years of age Persons 65 years of age or older		☐ The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is not								
National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous. Enter in Line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the ankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. National Standards: health care. Enter in Line al below the amount from IRS National Standards for Out-of-Pocket Health Care for persons of Syears of age, and in Line 21 the IRS National Standards for Out-of-Pocket Health Care for persons of Syears of age, and in Line 21 the IRS National Standards for Out-of-Pocket Health Care for persons of Syears of age, and in Line 21 the IRS National Standards for Out-of-Pocket Health Care for persons of Syears of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number of any additional dependents whom you support.) Multiply Line al by Line b2 to obtain a total amount for persons so and older, and enter the result in Line c2. Multiply Line al by Line b2 to obtain a total amount for persons of S and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B. Persons under 65 years of age Persons 65 years of age or older al. Allowance per person 60 a2. Allowance per person 144 b1. Number of persons 2 b2. Number of persons 0 c1. Subtotal 120.00 c2. Subtotal 120.00 c3. Subtotal 120.00 c4. Subtotal 120.00 c5. Subtotal 120.00 c5. Subtotal 120.00 c5. Subtotal 120.00 c5. Subtotal 120.00 c6. Subtotal 120.00 c7. Subtotal care for persons for persons of your federal income tax return, plus the number of available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). The ap			Part IV. C	ALCULATION ()F I	DEDUC	CTIONS FR	OM INCOME		
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Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons who are 65 years of age or older. (The applicable number of persons who are 65 years of age or older. (The applicable number of persons who are consistent of your you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons sof and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B. Persons under 65 years of age Persons 65 years of age or older a1. Allowance per person 60 a2. Allowance per person 144 b1. Number of persons 2 b2. Number of persons 0 c1. Subtotal 120.00 c2. Subtotal 0.00 \$ 120. Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. 258 Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of t	24A	Enter in application bankru on you	n Line 24A the "Total" amouble number of persons. (T ptcy court.) The applicable r federal income tax return	ount from IRS National his information is availal number of persons is the plus the number of any	Standalble at a standalble at	lards for A t www.uso mber that tional dep	Allowable Living doj.gov/ust/ or frowould currently bendents whom yo	Expenses for the om the clerk of the se allowed as exemptions ou support.	\$	1,092.00
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Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero. a. IRS Housing and Utilities Standards; mortgage/rent expense \$ 1,092.00 b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47 c. Net mortgage/rental expense Subtract Line b from Line a. Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:		b1.	Number of persons	2	b2.	Number	of persons	0		
Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero. a. IRS Housing and Utilities Standards; mortgage/rent expense \$ 1,092.00 b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47 c. Net mortgage/rental expense Subtract Line b from Line a. Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:		c1.	Subtotal	120.00	c2.	Subtotal	[0.00	\$	120.00
Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero. a. IRS Housing and Utilities Standards; mortgage/rent expense \$ 1,092.00 b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47 \$ 1,362.00 c. Net mortgage/rental expense Subtract Line b from Line a. Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:	25A	Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of					\$	481.00		
b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47 \$ 1,362.00 c. Net mortgage/rental expense Subtract Line b from Line a. \$ 0. Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:	25B	Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do								
home, if any, as stated in Line 47 c. Net mortgage/rental expense Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:							\$	1,092.00		
Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:			home, if any, as stated in I	Line 47	y you	5		*		
25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:									\$	0.00
	26	25B do Standa	oes not accurately compute rds, enter any additional ar	the allowance to which	you a	re entitled	d under the IRS H	Iousing and Utilities	\$	0.00

Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. ■ 1 2 or more. If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards: Transportation for the applicable mumber of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at wave.usdoj.gov/ust/ or from the clark of the bankruptey court.) S Local Standards: transportation; additional public transportation expenses. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation. (This amount is available at www.usdoj.gov/ust/ or from the clark of the bankruptey court.) Local Standards: transportation ownership/lesse expense; this (**Public Transportation*) and deduction for your claim an ownership/lesse expense. (You may not claim an ownership/lesse expense for more than two vehicles.) 1 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptey court); enter in Line be total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero. Local Standards: transportation ownership/lesse expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28.										
Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. □ 0 ■ 1. □ 0 = more. If you checked 0, enter on Line 27th the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable for proportion of the composition of the applicable number of vehicles in the applicable of the proportion of the proportion Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/uss/ or from the clerk of the bankruptcy court.) Local Standards: transportation; additional public transportation expenses. If you pay the operating expenses for a vehicle and also use public transportation are entitled to an additional deduction for your public transportation expenses, enter on Line 27b the "Public Transportation" amount from the IRS Local Standards: Transportation of the intervention of the proportion of the power of the power of the clerk of the bankruptcy court.) Local Standards: transportation awnership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense, (You may not claim an ownership/lease expense for more than two vehicles) ■ 1 □ 2 or more. Enter, in Line a Bow, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the elerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs of "One Car" from the IRS Local Standards: Transportation and the proposition of the Average Monthly Payment for any debts secured by Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28. Local Standards: transportation ownership/lease expense; Vehicle 2. Subtract Line b from			expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and							
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27B Some public transportation, and you contend that you are entitled to an additional deduction for your public transportation. Some public transportation are some public transportation. Some public transportation are some public transportation. This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense, (You may not claim an ownership/lease expense for more than two vehicles.) 1	212.00	\$	Transportation. If you checked 1 or 2 or more, enter on Line 27A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or							
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the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court), enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line and enter the result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs	49.15	9	Subtract Line b from Line a.	c. Net ownership/lease expense for Vehicle 1						
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b. 2, as stated in Line 47 \$ \$ 0.00 \$ c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a. \$ 30 Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. \$ 31 Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. \$ 32 Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. \$ 33 Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49. \$ Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter		0								
C. Net ownership/lease expense for Vehicle 2 Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter		0	Vehicle \$ 0.00							
state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter	0.00	9	Subtract Line b from Line a.							
Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter	902.00		such as income taxes, self employment taxes, social	state, and local taxes, other than real estate and sales taxes, such as inc	30					
deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter			mployment. Enter the total average monthly	Other Necessary Expenses: involuntary deductions for employmen						
life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter	0.00	\$	nandatory retirement contributions, union dues, and	deductions that are required for your employment, such as mandatory	31					
Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter	0.00			life insurance for yourself. Do not include premiums for insurance	32					
pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter	0.00	4	tar the total monthly amount that you are required to							
	0.00	\$	y, such as spousal or child support payments. Do not	pay pursuant to the order of a court or administrative agency, such as	33					
the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.	0.00	r	or education that is a condition of employment and for	the total average monthly amount that you actually expend for education that is required for a physically or mentally challenged depo	34					
1 pro-raing diffinition for freed to a fairmote.	0.00	1	rage monthly amount that you estually arrand or							
				other Necessary Expenses: childcare. Enter the total average mont childcare - such as baby-sitting, day care, nursery and preschool. Do	35					

36	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39.	\$	0.00
37	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.	\$	0.00
38	Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37.	\$	2,856.15
	Subpart B: Additional Living Expense Deductions		
	Note: Do not include any expenses that you have listed in Lines 24-37		
	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.		
39	a. Health Insurance \$ 0.00		
	b. Disability Insurance \$ 0.00		
	c. Health Savings Account \$ 0.00	¢.	0.00
	Total and enter on Line 39	\$	0.00
	If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:		
	\$		
40	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.	\$	0.00
41	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.	\$	0.00
42	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.	\$	0.00
43	Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$156.25 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.	\$	0.00
44	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.	\$	0.00
45	Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income.	\$	0.00
46	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45.	\$	0.00

Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 33. Chapter 13 administrative expenses. Multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expense. a. Projected average monthly Chapter 13 plan payment. b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) c. Average monthly administrative expense of chapter 13 case Total: Multiply Lines a and b				Subpart C: Deductions for De	bt P	ayment			
Monthly Payment or insurance Code Condition Payment Code Code Condition Payment Code Code Condition Payment Code Code Condition Payment Code Code Code Payment Code Code Code Payment Code Payment Code Code Payment Code Code Code Payment Code Code Code Code Code Code Code Code	47	own, list the name of creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly							
2011 XC90 Volvo (31,000 Miles; Good Condition) Name on Title: Paul Lucas VIN: YV4952CZ2B1605579 Insurance Through: Citizens Insurance Through: Citizens Insurance Through: Citizens Insurance Co. of the Mildwest Expiration: 41932014 to 10/19/2014 S		Name of Creditor Property Securing the Debt Average Monthly Include taxes							
Body Hillock Ct. Grand Haven, MI 49417 Parcel #:70-03-29-208-002 Insurance Trough: Citizens Insurance Co. Expiration: 10/19/2013 to 10/19/2014 The Debtor believes the property is worth approximately S 1,362.00 Insurance Trough: Citizens S 1,362.00 Insurance		a.	Chase Auto	Good Condition) Name on Title: Paul Lucas VIN: YV4952CZ2B1605579 Insurance Through: Citizens Insurance Co. of the Midwest Expiration: 4/19/2014 to			□yes ■no		
Solution Solution				609 Hillock Ct. Grand Haven, MI 49417 Parcel #:70-03-29-208-002 Insurance Through: Citizens Insurance Co. Expiration: 10/19/2013 to					
Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. Name of Creditor		b.	Citimortgage Inc	property is worth approximatley			■yes □no	\$	1.829.85
Name of Creditor Property Securing the Debt 1/60th of the Cure Amount	48	moto your payr sum	or vehicle, or other property near deduction 1/60th of any amounts listed in Line 47, in orders in default that must be paid in	cessary for your support or the support or nt (the "cure amount") that you must pay to maintain possession of the property.	f your the c The c	r dependents, yo creditor in addit cure amount wo	ou may include in ion to the uld include any		
Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 33. Chapter 13 administrative expenses. Multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expenses. a. Projected average monthly Chapter 13 plan payment. b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) c. Average monthly administrative expense of chapter 13 case Total Deductions for Debt Payment. Enter the total of Lines 47 through 50. Subpart D: Total Deductions from Income			Name of Creditor	1 10			he Cure Amount		
priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 33. Chapter 13 administrative expenses. Multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expense. a. Projected average monthly Chapter 13 plan payment. b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) c. Average monthly administrative expense of chapter 13 case Total: Multiply Lines a and b 173.80 Subpart D: Total Deductions from Income						,		\$	0.00
resulting administrative expense. a. Projected average monthly Chapter 13 plan payment. b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) c. Average monthly administrative expense of chapter 13 case Total: Multiply Lines a and b 51 Total Deductions for Debt Payment. Enter the total of Lines 47 through 50. Subpart D: Total Deductions from Income	49	prio	rity tax, child support and alime	ony claims, for which you were liable at					105.71
b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) c. Average monthly administrative expense of chapter 13 case Total: Multiply Lines a and b 51 Total Deductions for Debt Payment. Enter the total of Lines 47 through 50. \$ 2,109.36				ses. Multiply the amount in Line a by the	amo	unt in Line b, a	nd enter the		
51 Total Deductions for Debt Payment. Enter the total of Lines 47 through 50. \$ 2,109.36 Subpart D: Total Deductions from Income	50	b.	Current multiplier for your issued by the Executive Of information is available at the bankruptcy court.)	district as determined under schedules fice for United States Trustees. (This www.usdoj.gov/ust/ or from the clerk of	x	al: Multiply Lir	4.90	\$	173.80
	51	Tota							2,109.36
Total of all deductions from income. Enter the total of Lines 38, 46, and 51. \$ 4,965.51		1		Subpart D: Total Deductions f	rom	Income		1	
	52	Tota	al of all deductions from incor	ne. Enter the total of Lines 38, 46, and 5	1.			\$	4,965.51
Part V. DETERMINATION OF DISPOSABLE INCOME UNDER § 1325(b)(2)			Part V. DETERM	INATION OF DISPOSABLE I	NC	OME UNDE	ER § 1325(b)(2	2)	

6,907.3	\$	Total current monthly income. Enter the amount from Line 20.		53		
0.0	\$	Support income. Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child.		54		
0.0	\$			irement deductions. Enter the monthly total or ributions for qualified retirement plans, as specifiement plans, as specified in § 362(b)(19).	wages as contribu	55
4,965.	\$	Total of all deductions allowed under § 707(b)(2). Enter the amount from Line 52.		56		
		ting expenses in lines a-c below. or the total in Line 57. You must provide a detailed explanation	mstances and the result the expenses and enter expenses and you must	r special circumstances. If there are special c asonable alternative, describe the special circum ist additional entries on a separate page. Total case trustee with documentation of these ex- circumstances that make such expense nece	there is no reason If necessary, list a provide your case	
		ount of Expense	Amo	of special circumstances	Nature of	57
			\$		a.	
			\$		b.	
			\$		c.	
0.0	\$	al: Add Lines	Tota			
4,965.	\$	54, 55, 56, and 57 and enter the	the amounts on Lines 5	nents to determine disposable income. Add t	Total adjustmen result.	58
1,941.8	\$	Monthly Disposable Income Under § 1325(b)(2). Subtract Line 58 from Line 53 and enter the result.		59		
		CLAIMS	NAL EXPENSE (Part VI. ADDITION		
	ınder §	om your current monthly income		ses. List and describe any monthly expenses, nur family and that you contend should be an action of the second should be		
	monthly	Monthly Amount \$	a separate page. All fig	ii)(I). If necessary, list additional sources on a stal the expenses. se Description	707(b)(2)(A)(ii)(each item. Total Expense I a. b.	60
	monthly	Monthly Amount \$ \$ \$	a separate page. All fig	tal the expenses.	707(b)(2)(A)(ii)(each item. Total Expense I a. b. c.	60
	monthly	Monthly Amount \$ \$ \$ \$ \$		se Description	707(b)(2)(A)(ii)(each item. Total Expense I a. b.	60
	monthly	Monthly Amount \$ \$ \$	ines a, b, c and d	se Description Total: Add Li	707(b)(2)(A)(ii)(each item. Total Expense I a. b. c.	60
both debtors		Monthly Amount \$ \$ \$ \$ \$ \$ \$	ines a, b, c and d VERIFICATION	se Description Total: Add Li	707(b)(2)(Å)(ii)(each item. Total Expense I a. b. c. d. I declare under po	60
both debtors		Monthly Amount \$ \$ \$ \$ \$ \$ \$	ines a, b, c and d VERIFICATION ded in this statement is	Total: Add Li	707(b)(2)(A)(ii)(each item. Total Expense I a. b. c. d. I declare under pomust sign.)	60

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 12/01/2013 to 05/31/2014.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Chem Max Corp.

Income by Month:

6 Months Ago:	12/2013	\$1,870.00
5 Months Ago:	01/2014	\$4,675.00
4 Months Ago:	02/2014	\$3,740.00
3 Months Ago:	03/2014	\$3,740.00
2 Months Ago:	04/2014	\$3,740.00
Last Month:	05/2014	\$4,675.00
	Average per month:	\$3,740.00

Line 3 - Income from operation of a business, profession, or farm

Source of Income: **Chem Max Corp.** Income/Expense/Net by Month:

	Date	Income
6 Months Ago:	12/2013	\$3,015.17
5 Months Ago:	01/2014	\$31,424.77
4 Months Ago:	02/2014	\$18,919.55
3 Months Ago:	03/2014	\$29,964.90
2 Months Ago:	04/2014	\$54,025.78
Last Month:	05/2014	\$50,605.00
	Average per month:	\$31,325.86

Expense	Net
\$20,680.37	\$-17,665.20
\$32,769.04	\$-1,344.27
\$23,868.30	\$-4,948.75
\$31,114.13	\$-1,149.23
\$30,700.45	\$23,325.33
\$46,498.98	\$4,106.02
\$30,938.55	
verage Monthly NET Income:	\$387.32

Line 4 - Rent and other real property income

Source of Income: Norton Shores Rental Property

Income/Expense/Net by Month:

	Date	Income
6 Months Ago:	12/2013	\$5,000.00
5 Months Ago:	01/2014	\$6,250.00
4 Months Ago:	02/2014	\$5,000.00
3 Months Ago:	03/2014	\$6,250.00
2 Months Ago:	04/2014	\$5,000.00
Last Month:	05/2014	\$6,250.00
	Average per month:	\$5,625.00

Expense	Net
\$2,845.00	\$2,155.00
\$2,845.00	\$3,405.00
\$2,845.00	\$2,155.00
\$2,845.00	\$3,405.00
\$2,845.00	\$2,155.00
\$2,845.00	\$3,405.00
\$2,845.00	
Average Monthly NET Income:	\$2,780.00

Remarks:

The Debtor's business pays him \$1250 per week for rent.

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 12/01/2013 to 05/31/2014.

Non-CMI - Social Security Act Income Source of Income: Social Security Benefits Constant income of \$1,556.00 per month.